FOR INSTRUCTIONS, SEE BACK OF FORM		ſ	FORM		
DISCLOSURE SUMMARY PA	AGE		DR-2	DISCLOSURE	
COMMITTEE NAME (Must be same as on Statement of O	rganization)		(Rev. 05/2002)	REPORT	
Vote No Committee			For Office Use C	niv	
			Comm. #	17065	
IMPORTANT: Indicate type of committee you are reporting for:	اها		Indexed 1		
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Pac			Audited		
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/(8)Support Slate of Candidates	Cky Central Committee		Computer		
CANDIDATE COMMITTEES ONLY:					
Candidate Name	Political Party	1/	DISCLOSUR		l
Calididate Hairie	r ondon's arry		DISCLOSUR	CAMPAIGN	
07.0	District (if Occasion and Income	. y	Mar	BOARD	
Office Sought	District (if Senate or House	" /	MAY 8	2003	
		· Au	_	<003	
0 1 1001 1		-5.4	D		
Dor W Krateston	<u> 7/2-792-5</u>	668		3-03	
SIGNATURE OF TREASURER (or person filing this repo	ort) TELEPHONE		DATE	STORES	
Pouting Populties Due For I	ata Eilad Banarta Banga (izom (20 to \$900	,	
Routine Penalties Due For L	•		20 10 4000		
SEE INSTRUCTIONS ON BACK AND COMPLETE T			•		
1 AM FILING A 5-8-03	REPORT FOR AN/A (1) ELI	ECTION	/(2) <u>NO</u> N-ELEC	TION YEAR.	
(report date)	<u> </u>	dicate d	one		
CHECK IF AMENDMENT TO REPORT DATED		Local C	ommittees, enter	Date of Election	
			5-13-0	ŀ	
Check if this is final (termination) report and attach Notice	ce of Dissolution Form DR-3	County		es, enter County in	
(You must continue to file reports until a Notice of		which E	lection is held	1	
			CARREL/		
STATEME	NT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period.	(This is the total of all monies hel	d			
by the committee. This amount MUST be the same	e as the cash on hand at the end	i		23.40	12/
of the last reporting period, or must be zero if this	is first report filed.)		\$	0-1.0	/
ADD TOTAL MONEY TAKEN IN THIS PERIOD			9.6	/M @A	
Schedule A: Cash Contributions total (Attach Sch	edule A) (*also see in-kind below	')	30	40.00	
Schedule F: Loans Received total (Attach Schedu	ule F)				
Schedule H: Total Sales of Campaign Property (A	Attach Schedule H)				
(Schedule H applies to Candidates' Co	mmittees Only)				
	SUB-TOT	'AL	د چ	363,40	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule	OD				
Schooling R. Europaditures total (Attach Schooling	B) (**alon can dahta and laans b	المعماد		585.00	
Schedule F: Loan Repayments total (Attach Sche					
, ,	•	•••••			
CASH ON HAND at the end of this reporting period (if final	report, balance must		. /7	78.40	
be zero) (Attach DR-3)			Ψ <u></u>		ı
**UNPAID BILLS (From Schedule D - Attach Schedule D)			\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sc					
**OUTSTANDING LOANS (From Schedule F - Attach Sche	•				
•			—		
CANDIDATE COMMITTEES ONLY:					
CONSULTANT BREAKDOWN (Schedule G Attached?)			***************************************	ESNO	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - A	Attach Schedule H)	;	\$		

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
Vote NO Committee		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4/1/03	ID#	Haley Implement Hwy 30 WEST CARROLL, FA		\$ 200.00	
4/1/03	ID# CK# CASh	Bindy Caldwell		\$ 100.00	
4/11/03	CK# Cogh	unitemized Contribution		\$ 20.00	
4/1/03	ID# CK# CASh	un temized Contributions		\$ 20.00	
1/1/03	ID# CK# C46 ⁴	unitemized Contribution		\$ 20.00	
4/11/03	ID# CK# 496 4	un temized Contribution		\$ 20.00	
4/1/03	ID# CK# C#S4	unitemized contribution		820.00	
4/17/03	ID# CK# 8917	HAGEMANN FARM ACCOUNT HUBERT & VIRGINIA HAGEMANN CARROLL, JOWA		\$ 100.00	
4/17/03	ID# CK# 83//	OICA MARKETING COMPANY PO BOX 685 CARROLL, JOWA		£200.00	
4/24/03	ID# CK# OASK	unitemized Contribution		\$ 20,00	
			SUB-TOTAL	\$ 720.00	

TOTAL (if last page of this schedule)

of (for Schedule A)

SCHEDULE

MONETARY

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	/
	CHECK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	AMENDING FORM
Vote No Committee	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4/24/03	ID#	uniterized Contribution		\$ 20.00	
4/24/03	ID# CK#	unitemized Contributions		\$ 10.00	
4/24/03	ID# CK# 3/2/	DONLEY + Patricia GRANSTRA 708 E 22 ND ST CARROW, IA		\$50.00	
4/24/03	ID# CK# 6648	CARY KOSTER PO. BOX 442 CARROIT, JOURS		\$300.00	
4/24/03	10# CK# 5650	LARRY HONSMAN 1236 N COVET ST CHREOK, FA		\$100.00	
4/24/03	ID# CK# 001255	MARK BENERMARE Cheverolet 912 wast us they 30 PARROW, In		\$ 200.00	
4/24/03	ID# CK# <i>03484</i>	SUMMER FOODS INC, 624 W US HM, 30 CARROW, IN		\$ 100.00	
4/24/03	1D# CK# C464	uniterized contributions		\$20.00	
4/24/03	ID# CK# C#54	unitemized Contributions		\$ 20.00	
4/24/03	ID# CK# C45 G	unitemized Contributions		\$ 20.00	
			SUB-TOTAL		

TOTAL (If last page of this schedule)

SCHEDULE

(Rev. 06/97)

MONETARY

RECEIPTS

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

(☐ CHECK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	AMENDING FORM
: VotE NO Committee	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
Way	ID#	uniterized contribation		\$20.00	
4/24/03	CK# OBSh	INTERNIZED CONTRICATION	· · · · · · · · · · · · · · · · · · ·	\$	
4/24/03	CK# C484	unitamized Contribution		# 20.00	
4/24/03	CK# Closh	un itemized Contributions		\$ 20.00	
4/24/03	ID# CK# Clash	unitemized Contribution		\$ 20.00	
4/24/03	ID# CK# 5720	Shakon SibEnaller 1908 Quint AVE CARROU JOVA		\$ 200.00	
4/24/03	ID# CK# 1975	LARRY HONS MAN + SHORON SIDEWALLE 1908 Quint AVE CARROLL, JOWN		\$200.00	\
4/24/03	1D# CK# /676	Robert L. Olsen 2204 Ashwood Deive CARRON, Journ		\$ 100.00	
4/24/03	1D# CK#	PAUL SCHABEN CARROLL IOWA		\$100,00	
i i	ID#		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	ID#				
·	CK#				:
		<u> </u>	SUB-TOTAL	= 680.00	

TOTAL (if last page of this schedule)

SCHEDULE

(Rev. 06/97)

MONETARY

RECEIPTS

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Mus	t be	same as on	Statement of Organization)
V ote	N	com.	niHee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/31/03	ID# CK#	Jown Strings Bonk 510 Hy 380 WEST CORROH, Jown	BANK SERVICE Charges	\$ 7.35
2/28/03	ID# CK#	11	//	7.35
3/31/03	ID# CK#	//	1/	7.35
4/30/03	ID# CK#	11	//	7.35
5/3/03	ID# CK#	HERALL Publishing Congrany 508 N COURT (St.) CARROLL, JOWA	NEWSPAPER Odls	585.00
	ID# CK#			
	ID# CK#			
	ID#			
	CK#			
	<u>-</u>		SUB-TOTAL	\$

TOTAL (if last page of this schedule)

585.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page/ of/

y			AME	Acd.	
FOR INSTRUCTIONS, SEE BACK OF FORM	*	·	FORM		7
DISCLOSURE SUMMARY PAGE		1	DR-2	DIGOLOGIES	
COMMITTEE NAME (Must be same as on Statement of Organiza	etion)		ev. 05/2002)	DISCLOSURE REPORT	
Vote No Committee		_ E	r Office Use O	Inlu	
		1 1		3.11X	
IMPORTANT: Indicate type of committee you are reporting for:		1 1			
(1)Statewide/Legitlative (andidate (2)Statewide PAC (3)State Party (4) (5)County PAC (1)Ball R Issue/Frenchise Committee (7)County/City Cent	County/Local Candidate tral Committee	Au	dited		
(8)Support State of Gardidates		00	mputer		,
CANDIDATE COMMITTEES ONLY:					
Candidate Name JUL 1 8 2003	Political Party	-			
	District (if Senate or Hous	-	•		
Office Sought	District (it Senate of Hous	36)			
Dor W Entertain	7/2-792-	5667	5-3	3- 03	
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE S	SIGNED	-
Pouting Bandties Due Earl etc Ei	led Penarts Dance	from \$2	to ¢enn		•
Routine Penalties Due For Late Fi			, rA 4000		S
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FO			214041 F1 F2	TION NEW P	
				HON YEAR.	
(report date)	•	Indicate one	·		1
CHECK IF AMENDMENT TO REPORT DATED		1	-	Date of Election	
☐ Check if this is final (termination) report and attach Notice of Di	ssolution Form DR-3.	County &		es, enter County in	
(You must continue to file reports until a Notice of Dissolu	ition is filed.)		tion is held		
					! !
STATEMENT OF	CASH ON HAND				•
CASH ON HAND at the beginning of the reporting period. (This is by the committee. This amount MUST be the same as the of the last reporting period, or must be zero if this is first re-	e cash on hand at the er	nd	· /	23.40	12/2
ADD TOTAL MONEY TAKEN IN THIS PERIOD					
Schedule A: Cash Contributions total (Attach Schedule A	() (*also see in-kind below	w)	22	40.00	
Schedule F: Loans Received total (Attach Schedule F)	***************************************	•••••		**************************************	•
Schedule H: Total Sales of Campaign Property (Attach S	chedule H)				
(Schedule Happlies to Candidates' Committe					
· · · · · · · · · · · · · · · · · · ·	SUB-TO	TAL\$	23	363.40	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**al		٨,	, , ,		
Schedule B: Expenditures total (Attach Schedule B) (**al	so see debts and loans t	below)		585, 20	(6/9.
Schedule F: Loan Repayments total (Attach Schedule F)		************			
Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report, be zero) (Attach DR-3)	balance must			4	finale.
be zero) (Attach DR-3)	*******************************	\$	1.7	78,40 °	1 / 177. 4
**UNPAID BILLS (From Schedule D - Attach Schedule D)					Ī
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule					•
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	•				
ANDIDATE COMMITTEES ONLY:		.			
:ONSULTANT BREAKDOWN (Schedule G Attached?)			Y	ESNO	
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach S	chedule H)	\$	······································		

AMENDED

FOR INSTRUCTIONS, SEE BACK OF FORM

JUL 1 8 2003

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B MONETARY
(Rev. 09/97) EXPENDITURES

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Mus	t be s	same as on Statement of Organization)
Vote	NO	Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED	
1/31/03	ID# CK#	Jown Savings Rover 570 May 300 west Concert, January	Bendo Textulo e Climages	s 7.35	ν
£ (#8/63)	ID# CK#	H	11	7.23	V
3/3/93	ID# CK#	11	1/	7.35	\ \
4/50/03	ID# CK#	1/	11		~
5/3/03	ID# CK#	HERALL Publisher Company 508 N Count Ost. O BARROW, John	Newspaper odes	585,00	V
	ID# CK#				
	ID# CK#				
·	ID# CK#				

TOTAL (if last page of this schedule)

SUB-TOTAL

\$ 585.00 61

TUIC DAY	ADDITE		IDATES).	COMMITTEES	· ANII V.
I MIS BUX	APPLIES	IU CAND	IUAICO	CUMMULLES	S LIMIL T :

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page .		of/	
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